10/575364

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

SALATUSING

									007/149/107				
	CLAIMS AS FILED - PART I							SMALL ENTITY TYPE		ΩP	OTHER THAN OR SMALL ENTITY		
	NATIONAL	OTA OF FEE	(Colu	mn 1).	<del></del>	(Column 2)	7	TIFE		UK <b>T</b>	SWALL	ENHIY	
0.3	S. NATIONAL	STAGE FEES	-	<del></del>	<u> </u>		_	RATE	FEE	] .	RATE	FEE	
BAS	SIC FEE	· -		SMALL ENT. = \$ 150 LARGE I				BASIC FEE		.OR	BASIC FEE	200	
EXAMINATION FEE			Satisfies PCT (4) = \$5	0/\$ 100	1	ther situations = \$ 100 / \$ 200	1	EXAM. FEE		1	EXAM. FEE	20	
SEARCH FEE			U.S. is ISA = ALL other c \$ 200 /	ountries =		other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	402	
FEE FOR EXTRA SPEC. PGS.			99, mi	nus 100 =		/ 50 =		X \$ 125 =		1.	X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			ΛΛ m	ninus 20 =	*			X \$ 25 =		OR	X \$ 50 =	<u> </u>	
IND	EPENDENT CI	LAIMS	3	minus 3 =	* • .	2	1	X \$ 100 =		OR	X \$ 200 =	1/1/8	
MU	TIPLE DEPEN	IDENT CLAIM PR	RESENT	· · · · · · · · · · · · · · · · · · ·	<u> </u>		1	+ \$ 180 =		OR	+ \$ 360 =	900	
* If	the difference	e in column 1 is	less than zer	ro, enter "(	O" in co	olumn 2	J	TOTAL		OR	TOTAL	132	
				•				•		]		1000	
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS		HIGH	EST		1 1		ADDI-	1	0, (2.2.)	1.	
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY.	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		ÖR	+ \$ 360 =		
							J. [	TOTAL ADDIT		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		<b>=</b>		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		: : : : : : : : : : : : : : : : : : : :	1	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
							Ļ	TOTAL ADDIT. FEE		OR	TOTAL ADDIT		
-		•	•								,		
*	If the entry in acti	mn 1 in lass #s a re											
**	more endy in colu	ımn 1 is less than the	e entry in column	2, write "0" in	column	3. '						J.	

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.